

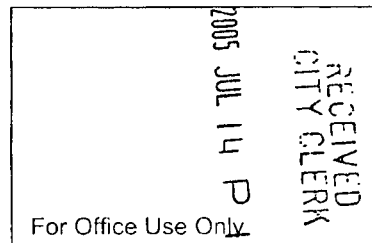
# CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

City of Las Vegas/State of Nevada

Name (print) Betsy Kolkoski Office (if applicable) Las Vegas Municipal Court District (if applicable) Department 2  
 Mailing Address (include city and zip code) [REDACTED] Telephone No. [REDACTED]  
 E-Mail Address kolkoski@cox.net

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRTY ☐ IND EXP ☐ AMENDED ☐ ANNUAL FILING

- ☐ **Report #1 — Due March 29, 2005**  
 Period: Jan. 1, 2005 — Mar. 24, 2005
- ☐ **Report #2 — Due May 31, 2005**  
 Period: Mar. 25, 2005 — May 26, 2005
- ☒ **Report #3 Due — July 15, 2005**  
 Period: May 27, 2005 — June 30, 2005



## CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100	\$ 500.00	\$26,726.71
2. Total Monetary Contributions Received of \$100 or Less	0	4,300.00
3. Total Amount of Monetary Contributions Received (Add Lines 1 and 2)	500.00	31,026.71
4. Total Value of In Kind Contributions Received in Excess of \$100	0	\$1,077.50

## EXPENSES SUMMARY

5. Total Monetary Expenses Paid in Excess of \$100	0	60,114.64
6. Total Monetary Expenses Paid of \$100 or Less	0	1,394.78
7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)	0	61,509.42
8. Total Value of In Kind Expenses in Excess of \$100	0	1,077.50

## AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Elizabeth B. Kolkoski  
 Signature

14 Jul 05  
 Date

**BETSY KOLKOSKI**

**Las Vegas Municipal Court**

**Department 2**

**Contributions In Excess Of \$100 Or, When Added Together Exceed \$100**

NAME AND ADDRESS	DATE(S)	AMOUNTS	LOAN
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HARRY V. MOHNEY TTE 4430 W. Ford Avenue Las Vegas, NV 89139-7614	JUNE 7 2005	\$500.00	
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TOTAL		\$500.00	
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**BETSY KOLKOSKI**

**Las Vegas Municipal Court**

**Department 2**

**Expenses in Excess of \$100**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
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NONE

**BETSY KOLKOSKI**

**Las Vegas Municipal Court**

**Department 2**

**IN KIND CONTRIBUTIONS**

CONTRIBUTORS NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
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NONE

**BETSY KOLKOSKI**

**Las Vegas Municipal Court**

**Department 2**

**IN KIND EXPENSES**

NAME AND ADDRESS OF  
PERSON, GROUP, OR  
ORGANIZATION WHO  
RECEIVED THE  
IN KIND GOOD(S) OR  
SERVICE(S)

DATE OF EACH  
IN KIND  
EXPENSE

DESCRIPTION  
OF EACH  
IN KIND  
EXPENSE

VALUE OF EACH  
IN KIND  
EXPENSE

CHECK  
HERE IF  
LOAN

NONE